

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Rock River Tool & Die, Inc

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 36-4056136

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

205 E 3rd Street  
Rock Falls, IL 61071

Number, Street, City, State & ZIP Code

Whiteside  
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor  
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other. Specify:

Debtor **Rock River Tool & Die, Inc**  
Name

Case number (if known)

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor Rock River Tool & Die, Inc  
Name Case number (if known)

11. Why is the case filed in this district? Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☐ No
- ☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention? (Check all that apply.)**
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard?
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☒ Other **Vacant and listed for sale.**
- Where is the property?** 205 E 3rd Street  
Rock Falls, IL, 61071-0000  
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☒ Yes. Insurance agency Sentry Insurance  
Contact name Keith  
Phone 800-295-6919

**Statistical and administrative information**

13. Debtor's estimation of available funds Check one:
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- ☒ 1-49 ☐ 1,000-5,000 ☐ 25,001-50,000
- ☐ 50-99 ☐ 5001-10,000 ☐ 50,001-100,000
- ☐ 100-199 ☐ 10,001-25,000 ☐ More than 100,000
- ☐ 200-999

15. Estimated Assets
- ☐ \$0 - \$50,000 ☐ \$1,000,001 - \$10 million ☐ \$500,000,001 - \$1 billion
- ☐ \$50,001 - \$100,000 ☐ \$10,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion
- ☒ \$100,001 - \$500,000 ☐ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 billion
- ☐ \$500,001 - \$1 million ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion

16. Estimated liabilities
- ☐ \$0 - \$50,000 ☐ \$1,000,001 - \$10 million ☐ \$500,000,001 - \$1 billion
- ☐ \$50,001 - \$100,000 ☐ \$10,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion
- ☒ \$100,001 - \$500,000 ☐ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 billion
- ☐ \$500,001 - \$1 million ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion

Debtor **Rock River Tool & Die, Inc**  
Name

Document

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Case number (if known)

**Request for Relief, Declaration, and Signatures****WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

05/19/2017  
MM/DD/YYYYX James R. Wright  
Signature of authorized representative of debtorJames Wright

Printed name

Title President**18. Signature of attorney**X Bernard J. Natale  
Signature of attorney for debtor

Date

05/19/2017  
MM/DD/YYYYBernard J. Natale

Printed name

Bernard J. Natale, Ltd

Firm name

Edgebrook Office Center  
1639 N. Alpine Road, Suite 401  
Rockford, IL 61107

Number, Street, City, State &amp; ZIP Code

Contact phone (815) 964-4700Email address natalelaw@bjnatalelaw.com2018683 Illinois

Bar number and State

Fill in this information to identify the case:

Debtor name Rock River Tool & Die, Inc

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☒ Other document that requires a declaration Statement of Financial Affairs (Official Form 2017)

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

05/19/17

x

James B. Wright  
Signature of individual signing on behalf of debtor

James Wright

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Rock River Tool & Die, Inc

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>400,000.00</u>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>992.83</u>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>400,992.83</u>

Part 2: Summary of Liabilities

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>238,887.59</u>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>118,770.56</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>132,036.03</u>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>489,694.18</u>

**Fill in this information to identify the case:**

Debtor name Rock River Tool & Die, Inc

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

- ☒ No. Go to Part 2.  
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.

Debtor Rock River Tool & Die, Inc Case number (If known) \_\_\_\_\_  
Name

☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.  
☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <b>205 E 3rd Street, Rock Falls, IL APNs - 11-27-151-014; 11-27-151-016; 11-27-151-013</b>	<b>Fee Simple</b>	<b>\$0.00</b>	<b>Appraisal</b>	<b>\$400,000.00</b>

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

**\$400,000.00**

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☐ No  
☒ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 2

Debtor Rock River Tool & Die, Inc Case number (If known) \_\_\_\_\_  
Name

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

Current value of  
debtor's interest

71. **Notes receivable**  
Description (include name of obligor)
72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** Examples: Season tickets, country club membership  
Cimco - due from sale of scrap

Unknown

Sentry Insurance - Credit balance on account

\$992.83

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$992.83

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Debtor Rock River Tool & Die, Inc Case number (If known) \_\_\_\_\_  
Name

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$400,000.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>\$992.83</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$992.83</u>	<u>\$400,000.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$400,992.83</u>

**Fill in this information to identify the case:**

Debtor name **Rock River Tool & Die, Inc**

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<p><b>Sauk Valley Bank</b></p> <p>Creditor's Name</p> <p><b>201 West 3rd Street</b> <b>Sterling, IL 61081</b></p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred <b>04/2017</b></p> <p>Last 4 digits of account number <b>5682</b></p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <b>1. Sauk Valley Bank</b> <b>2. Sauk Valley Bank</b> <b>3. Whiteside County Collector</b></p>	<p>Describe debtor's property that is subject to a lien <b>205 E 3rd Street, Rock Falls, IL</b> <b>APNs - 11-27-151-014; 11-27-151-016;</b> <b>11-27-151-013</b></p> <p>Describe the lien <b>Mortgage</b></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<b>\$179,154.59</b>	<b>\$400,000.00</b>
2.2	<p><b>Sauk Valley Bank</b></p> <p>Creditor's Name</p> <p><b>201 West 3rd Street</b> <b>Sterling, IL 61081</b></p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred <b>07/2016</b></p> <p>Last 4 digits of account number <b>5680</b></p>	<p>Describe debtor's property that is subject to a lien <b>205 E 3rd Street, Rock Falls, IL</b> <b>APNs - 11-27-151-014; 11-27-151-016;</b> <b>11-27-151-013</b></p> <p>Describe the lien <b>Second Mortgage</b></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p>	<b>\$44,225.00</b>	<b>\$400,000.00</b>

Debtor **Rock River Tool & Die, Inc**

Case number (if know)

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

**Specified on line 2.1**

**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.3 Whiteside County Collector**

Creditor's Name

**Whiteside County  
Courthouse  
200 E. Knox Street  
Morrison, IL 61270**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred**

**2016**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

**Specified on line 2.1**

**Describe debtor's property that is subject to a lien**

**205 E 3rd Street, Rock Falls, IL  
APNs - 11-27-151-014; 11-27-151-016;  
11-27-151-013**

**\$15,508.00**

**\$400,000.00**

**Describe the lien**

**Real Estate Taxes**

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$238,887.59**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Fill in this information to identify the case:**

Debtor name **Rock River Tool & Die, Inc**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p><b>Barry Young</b>  <b>21641 Hoover Rd</b>  <b>Sterling, IL 61081</b></p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p><b>Wages</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<b>\$12,025.00</b>	<b>\$12,025.00</b>
2.2	<p>Priority creditor's name and mailing address</p> <p><b>Carroll O Berg, Jr</b>  <b>29028 Mechling Ln</b>  <b>Rock Falls, IL 61071</b></p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p><b>Accrued vacation pay and severance</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<b>\$10,379.70</b>	<b>\$10,379.70</b>

Debtor	<b>Rock River Tool &amp; Die, Inc</b> Name		Case number (if known)
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2.3	Priority creditor's name and mailing address <b>Chad M Oldham</b> <b>700 N Meyers Ave</b> <b>Milledgeville, IL 61051</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$964.00</b>	<b>\$964.00</b>
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address <b>Cody A Lawson</b> <b>1406 8th Avenue</b> <b>Rock Falls, IL 61071</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,631.92</b>	<b>\$3,631.92</b>
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address <b>Daniel C Rodriguez</b> <b>607 West 3rd Street</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$929.38</b>	<b>\$929.38</b>
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address <b>Danny L Jones</b> <b>1507 8th Avenue</b> <b>Rock Falls, IL 61071</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$8,949.20</b>	<b>\$8,949.20</b>
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Rock River Tool &amp; Die, Inc</b> Name		Case number (if known)	
2.7	Priority creditor's name and mailing address <b>Eric M Woodard</b> <b>314 E 2nd Street</b> <b>Rock Falls, IL 61071</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,014.32	\$1,014.32
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.8	Priority creditor's name and mailing address <b>James Wright</b> <b>2104 E 39th Street</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$12,025.00	\$12,025.00
	Date or dates debt was incurred	Basis for the claim: <b>Wages</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.9	Priority creditor's name and mailing address <b>Joseph J Wright</b> <b>2207 14th Ave</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,600.00	\$6,600.00
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.10	Priority creditor's name and mailing address <b>Robert W Snyder</b> <b>310 9th Ave</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,970.40	\$10,970.40
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severence</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Rock River Tool & Die, Inc**  
Name

Case number (if known)

2.11	Priority creditor's name and mailing address <b>Scott E Tornow</b> <b>207 S Lincoln Street</b> <b>Tampico, IL 61283-7716</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$7,475.60</b>	<b>\$7,475.60</b>
Date or dates debt was incurred		Basis for the claim: <b>Accrued vacation pay and severence</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.12	Priority creditor's name and mailing address <b>Sharon Shinault</b> <b>209 W 20th Street</b> <b>Rock Falls, IL 61071</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$12,025.00</b>	<b>\$12,025.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Wages</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.13	Priority creditor's name and mailing address <b>Terry A Warner</b> <b>2201 E. 7th Street</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$13,838.40</b>	<b>\$13,838.40</b>
Date or dates debt was incurred		Basis for the claim: <b>Accrued vacation pay and severence</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.14	Priority creditor's name and mailing address <b>Thomas W Cole</b> <b>406 E 5th Street</b> <b>Sterling, IL 61081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,235.20</b>	<b>\$9,235.20</b>
Date or dates debt was incurred		Basis for the claim: <b>Accrued vacation pay and severence</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Rock River Tool &amp; Die, Inc</b>	Case number (if known)	
	Name		

2.15	Priority creditor's name and mailing address <b>Todd D Tornow</b> <b>106 North Main Street</b> <b>Tampico, IL 61283</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$8,707.44</b> <b>\$8,707.44</b>
	Date or dates debt was incurred	Basis for the claim: <b>Accrued vacation pay and severance</b>	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>ACCU-CUT Incorporated</b> <b>1617 MAGNOLIA STREET</b> <b>Rockford, IL 61104</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,995.00</b>
3.2	Nonpriority creditor's name and mailing address <b>Aramark Uniform Services</b> <b>Auca Chicago MC Lock Box</b> <b>25259 NETWORK PLACE</b> <b>Chicago, IL 60673-1252</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$492.50</b>
3.3	Nonpriority creditor's name and mailing address <b>Barry Young</b> <b>21641 Hoover Rd</b> <b>Sterling, IL 61081</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Loans and expenses</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,912.37</b>
3.4	Nonpriority creditor's name and mailing address <b>Blackhawk Industrial Distribution</b> <b>PO Box 205665</b> <b>Dallas, TX 75320-5665</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Various account invoice balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,115.51</b>
3.5	Nonpriority creditor's name and mailing address <b>BlueWater Thermal Solutions</b> <b>PO Box 712534</b> <b>Cincinnati, OH 45271-2534</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$334.00</b>

Debtor Rock River Tool & Die, Inc Case number (if known) \_\_\_\_\_

Name

3.6	<p>Nonpriority creditor's name and mailing address</p> <p><b>Cline Tool Service Co, Inc</b>  <b>Attn: Accounting</b>  <b>PO Box 866</b>  <b>Newton, IA 50208</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Various invoice account balance</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$483.32</b></p>
3.7	<p>Nonpriority creditor's name and mailing address</p> <p><b>Diamond Heat Treating</b>  <b>3691 Publishers Drive</b>  <b>Rockford, IL 61109</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Various invoice account balance</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$9,021.96</b></p>
3.8	<p>Nonpriority creditor's name and mailing address</p> <p><b>EWI/3DCNC Inc</b>  <b>3019 Eastrock Court</b>  <b>PO Box 7473</b>  <b>Rockford, IL 61109-7473</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Various invoice account balance</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$261.50</b></p>
3.9	<p>Nonpriority creditor's name and mailing address</p> <p><b>Gleason Cutting Tools</b>  <b>Dept 550</b>  <b>PO Box 8000</b>  <b>Buffalo, NY 14267</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Various invoice account balance</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$824.23</b></p>
3.10	<p>Nonpriority creditor's name and mailing address</p> <p><b>Hulick Metals, Inc</b>  <b>c/o: Attorney Tom Green</b>  <b>6833 Stalter Drive</b>  <b>Rockford, IL 61108</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>AR59</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Alleged claim of payment owed (not including fees, costs, interest)</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$29,264.95</b></p>
3.11	<p>Nonpriority creditor's name and mailing address</p> <p><b>James Wright</b>  <b>2104 E 39th Street</b>  <b>Sterling, IL 61081</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Loans and expenses</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$28,190.29</b></p>
3.12	<p>Nonpriority creditor's name and mailing address</p> <p><b>Johnson Oil Co</b>  <b>1305 12th Avenue</b>  <b>Rock Falls, IL 61071</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Various invoice account balance</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$1,184.40</b></p>

Debtor **Rock River Tool & Die, Inc**  
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Case number (if known)

3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Metrology Solutions</b> <b>1335 Lakeside Drive</b> <b>Unit 6</b> <b>Romeoville, IL 60446</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$200.00</b></u>
<hr/>			
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Micro Punch and Die Co</b> <b>Kirk Kirking</b> <b>PO Box 5252</b> <b>Rockford, IL 61125</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$7,759.75</b></u>
<hr/>			
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>MSC Industrial Suply Inc</b> <b>PO Box 953635</b> <b>Saint Louis, MO 63195-3635</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$953.17</b></u>
<hr/>			
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Norman J Geer, Esq.</b> <b>105 North Main Street</b> <b>Bowling Green, OH 43402</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>2012-2014 COMM</b></u> <u><b>Invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$21,765.00</b></u>
<hr/>			
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Pro Tech Calibraion &amp; Repair</b> <b>1827 First Ave</b> <b>Silvis, IL 61282</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$275.00</b></u>
<hr/>			
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>S.J. Smith Welding Supply</b> <b>2500 1st Ave</b> <b>Rte. 40</b> <b>Rock Falls, IL 61071-3523</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Various invoice account balance</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$3,749.76</b></u>
<hr/>			
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Sharon Shinault</b> <b>209 W 20th Street</b> <b>Rock Falls, IL 61071</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Loans and expenses</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$2,204.36</b></u>

Debtor Rock River Tool & Die, Inc Case number (if known) \_\_\_\_\_

Name

3.20 Nonpriority creditor's name and mailing address **Sussex Tool and Supply**  
**PO Box 355**  
**Lannon, WI 53046**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$630.15**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Various invoice account balance  
 Is the claim subject to offset? ☒ No ☐ Yes

3.21 Nonpriority creditor's name and mailing address **United Steel Workers of America**  
**502 Woodburn Avenue**  
**PO Box 916**  
**Sterling, IL 61081**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Notice Only  
 Is the claim subject to offset? ☒ No ☐ Yes

3.22 Nonpriority creditor's name and mailing address **United Steel Workers of America**  
**Attn: Mark Trone**  
**679 W. 2nd Street**  
**Galesburg, IL 61401**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Notice Only  
 Is the claim subject to offset? ☒ No ☐ Yes

3.23 Nonpriority creditor's name and mailing address **United Way of STRLG & RF**  
**502 1st Ave**  
**Sterling, IL 61081**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$4,116.25**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Various invoice account balance  
 Is the claim subject to offset? ☒ No ☐ Yes

3.24 Nonpriority creditor's name and mailing address **USA Carbide Tooling Inc**  
**PO Box 170908**  
**Spartanburg, SC 29301-0908**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$530.95**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Various invoice account balance  
 Is the claim subject to offset? ☒ No ☐ Yes

3.25 Nonpriority creditor's name and mailing address **Zapp Tooling Alloys Inc**  
**c/o Zapp Precision Strip Inc**  
**266 Barnet Blvd**  
**New Bedford, MA 02745**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.* **\$771.61**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Various invoice account balance  
 Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address \_\_\_\_\_

On which line in Part 1 or Part 2 is the related creditor (if any) listed? \_\_\_\_\_

Last 4 digits of account number, if any \_\_\_\_\_

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Debtor **Rock River Tool & Die, Inc**  
Name

Case number (if known) \_\_\_\_\_

**5a. Total claims from Part 1**

**5b. Total claims from Part 2**

**5c. Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

**Total of claim amounts**

5a. \$ **118,770.56**

5b. + \$ **132,036.03**

5c. \$ **250,806.59**

**Fill in this information to identify the case:**

Debtor name Rock River Tool & Die, Inc

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206G**

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

*Property*

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fill in this information to identify the case:**

Debtor name **Rock River Tool & Die, Inc**

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Barry Young**

**21641 Hoove Rd  
Sterling, IL 61081**

**Sauk Valley Bank**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.2 **Barry Young**

**21641 Hoove Rd  
Sterling, IL 61081**

**Sauk Valley Bank**

☒ D 2.2  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.3 **James Wright**

**2104 E 39th Street  
Sterling, IL 61081**

**Sauk Valley Bank**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.4 **James Wright**

**2104 E 39th Street  
Sterling, IL 61081**

**Sauk Valley Bank**

☒ D 2.2  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.5 **Sharon Shinault**

**209 W 20th Street  
Rock Falls, IL 61071**

**Sauk Valley Bank**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

Debtor Rock River Tool & Die, Inc Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Sharon Shinault</b> <b>209 W 20th Street</b> <b>Rock Falls, IL 61071</b>	<b>Sauk Valley Bank</b>	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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**Fill in this information to identify the case:**

Debtor name Rock River Tool & Die, Inc

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**

**From the beginning of the fiscal year to filing date:**

From 1/01/2017 to Filing Date

**Sources of revenue**  
Check all that apply

☐ Operating a business

☒ Other Operating a business plus equipment sale proceeds

**Gross revenue**  
(before deductions and exclusions)

\$171,425.64

**For prior year:**

From 1/01/2016 to 12/31/2016

☒ Operating a business

☐ Other \_\_\_\_\_

\$1,095,006.00

**For year before that:**

From 1/01/2015 to 12/31/2015

☒ Operating a business

☐ Other \_\_\_\_\_

\$1,191,166.00

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. <b>Sauk Valley Bank</b> <b>201 West 3rd Street</b> <b>Sterling, IL 61081</b>	<b>Monthly and</b> <b>Account</b> <b>Sweeps</b>	<b>Unknown</b>	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. <b>Hulick Metals, Inc vs. Rock River Tool and Die, Inc</b> <b>2017-AR-59</b>	<b>Collection</b>	<b>17th Judicial Circuit</b> <b>Winnebago County</b> <b>Rockford, IL</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions**

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
--	--	---------------	------------------------

**Part 6: Certain Payments or Transfers**

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. <b>Bernard J. Natale, Ltd</b> <b>Edgebrook Office Center</b> <b>1639 N. Alpine Road, Suite 401</b> <b>Rockford, IL 61107</b>	<b>Attorney Fees and Costs</b>	<b>05/2017</b>	<b>\$2,335.00</b>
Email or website address <b>natalelaw@bjnatalelaw.com</b>			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Various Third Parties	Public auction of machinery, equipment, fixtures and supplies Net after sale costs	02/2017	\$164,818.08
Relationship to debtor None			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

**Rock River Tool & Die, Inc. 401(k) (administered by Edward Jones)**

Employer identification number of the plan

EIN: **364056136**

Has the plan been terminated?

☐ No☒ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<b>Sauk Valley Bank</b> <b>201 West 3rd Street</b> <b>Sterling, IL 61081</b>	<b>XXXX-4101</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>05/2017</b> <b>Account sweep</b> <b>by secured</b> <b>creditor</b>	<b>\$0.00</b>
18.2.	<b>Sauk Valley Bank</b> <b>201 West 3rd Street</b> <b>Sterling, IL 61081</b>	<b>XXXX-4201</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>05/2017</b> <b>Account sweep</b> <b>by secured</b> <b>creditor</b>	<b>\$0.00</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
<b>Jerry West</b> <b>RCM</b> <b>185 15th Avenue</b> <b>Rockford, IL 61104</b>	<b>Rock River Tool &amp; Die,</b> <b>Inc.</b> <b>205 E 3rd Street</b> <b>Rock Falls, IL 61071</b>	<b>air compressor system and</b> <b>electrical buss bar</b> <b>(purchased at auction but not</b> <b>yet removed)</b>	<b>Unknown</b>

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
-----------------------	-------------------------------------	--

**26. Books, records, and financial statements**

**26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.**

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Wipfli Richard J Wells 403 E 3rd Street Sterling, IL 61081</b>	<b>1996 - 2017</b>
26a.2. <b>Sharon Shinault 209 W 20th Street Rock Falls, IL 61071</b>	<b>1996 - 2017</b>

**26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.**

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

☐ None

Name and address	Date of service From-To
26b.1. <b>Sharon Shinault</b> <b>209 W 20th Street</b> <b>Rock Falls, IL 61071</b>	

Name and address	Date of service From-To
26b.2. <b>Wipfli</b> <b>Richard J Wells</b> <b>403 E 3rd Street</b> <b>Sterling, IL 61081</b>	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <b>James Wright</b> <b>2104 E 39th Street</b> <b>Sterling, IL 61081</b>	
26c.2. <b>Sharon Shinault</b> <b>209 W 20th Street</b> <b>Rock Falls, IL 61071</b>	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. <b>Sauk Valley Bank</b> <b>201 West 3rd Street</b> <b>Sterling, IL 61081</b>

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>James Wright</b>	<b>2104 E 39th Street</b> <b>Sterling, IL 61081</b>	<b>President</b>	<b>64.71%</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Barry Young</b>	<b>21641 Hoove Rd</b> <b>Sterling, IL 61081</b>	<b>Vice President</b>	<b>23.53%</b>

Debtor **Rock River Tool & Die, Inc**

Case number (if known) \_\_\_\_\_

Name	Address	Position and nature of any interest	% of interest, if any
<b>Sharon Shinault</b>	<b>209 W 20th Street Rock Falls, IL 61071</b>	<b>Secretary-Treasurer</b>	<b>11.76%</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No  
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No  
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	<b>James Wright 2104 E 39th Street Sterling, IL 61081</b>	<b>\$20,350.00</b>	<b>05/2016 - 09/2016</b>	<b>Wages</b>
	<b>Relationship to debtor President</b>			
30.2	<b>Barry Young 21641 Hoove Rd Sterling, IL 61081</b>	<b>\$20,350.00</b>	<b>05/2016 - 09/2016</b>	<b>Wages</b>
	<b>Relationship to debtor Vice President</b>			
30.3	<b>Sharon Shinault 209 W 20th Street Rock Falls, IL 61071</b>	<b>\$20,350.00</b>	<b>05/2016 -09/2016</b>	<b>Wages</b>
	<b>Relationship to debtor Secretary Treasurer</b>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No  
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
<b>Rock River Tool and Die, Inc 401(k)</b>	<b>EIN: 364056136</b>

Debtor Rock River Tool & Die, Inc

Document

Page 33 of 39

Case number (if known)

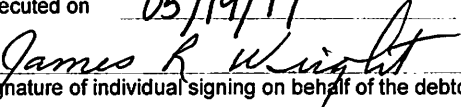
**Part 14: Signature and Declaration**

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

05/19/17  
Signature of individual signing on behalf of the debtorJames Wright

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No☐ Yes

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re Rock River Tool & Die, Inc

Debtor(s)

Case No.

Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- |   |    |                 |
|---|----|-----------------|
| For legal services, I have agreed to accept           | \$ | <u>2,000.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>2,000.00</u> |
| Balance Due   | \$ | <u>0.00</u>     |
2. \$ 335.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
  - [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date 05/19/2017

  
Bernard J. Natale 2018683 Illinois  
Signature of Attorney  
Bernard J. Natale, Ltd  
Edgebrook Office Center  
1639 N. Alpine Road, Suite 401  
Rockford, IL 61107  
(815) 964-4700 Fax: (815) 316-4646  
natalelaw@bjnatalelaw.com  
Name of law firm

### Chapter 7 Bankruptcy Fee Agreement

Federal law requires the execution of a written agreement between attorney and client for Bankruptcy representation. Signing this agreement shall engage the services of **Bernard J. Natale, Ltd.**, hereinafter "**Attorney**" for Bankruptcy representation pursuant to Title 11, United States Code.

*Whereas, **ROCK RIVER TOOL & DIE, INC.**, desires to engage the services of **Attorney** to represent clients' interest in connection with Bankruptcy Proceedings, to be filed within four (4) months of this Agreement, **Attorney** and client do hereby agree:*

1. ☒ Clients shall pay to **Attorney** for the services described below in paragraph 2, the base fee of **\$ 2,000.00** plus costs of **\$335.00**, prior to case filing.
2. ☒ The **Attorney's** base fee shall include services rendered *pre-petition* as follows: **Attorney** shall interview clients, analyze, prepare and file a Chapter 7 Bankruptcy Petition and appear at the first meeting of creditors held pursuant to 11 U.S.C. 341. **Attorney** shall further review and advise with respect to reaffirmation agreements. ***Whether or not a Chapter 7 bankruptcy petition is filed, all fees paid are not refundable.***
3. ☒ After the filing of a Chapter 7 Bankruptcy Petition, as contemplated herein, any other services provided by **Attorney** deemed necessary and incidental to the bankruptcy proceeding shall be considered *post-petition* services not contemplated by the fee agreed to in paragraph 1. The base fee does not include preparation of amendments to Bankruptcy Schedules, including, but not limited to, amended schedules to add creditors not listed in the original petition. These services will be billed at **Attorney's** hourly rate plus cost of Court filing fees.
4. ☒ The base fee does not include representation in any *post-petition* services which may occur, including, but not limited to, court appearances for dischargeability issues, judicial lien avoidances, relief from stay actions, or any adversary proceedings. These services will be billed at **Attorney's** hourly rate plus cost of Court filing fees, client will be billed and, by signature below, agrees to pay, *post-petition*.
5. ☒ The failure of client to pay for *post-petition* services when the same become due and payable, as set forth above, shall constitute cause for **Attorney** to withdraw as attorney of record and cease all further services to client. Any withdrawal as attorney for client shall not be deemed a waiver of fees due and payable. ***Clients agree to pay all reasonable costs of collection of any unpaid fees and costs, including reasonable attorney fees incurred in collection.***
6. ☒ By executing this agreement, clients agree that they have had an opportunity to discuss the agreement with **Attorney**, have asked any questions that have arisen, and have received understandable explanations for the questions, and is fully aware of the information contained herein.
7. ☒ The proposed Debtor is Rock River Tool & Die, Inc., however individuals signing this contract on behalf of Debtor as clients, do hereby also personally guarantee payment of fees.

GUARANTOR

Date:

BERNARD J. NATALE, LTD.

James R. Wright 5/12/17  
JAMES R. WRIGHT

By: Bernard J. Natale

GUARANTOR

Date:

GUARANTOR

Date:

Barry E. Young  
BARRY E. YOUNG

Sharon M. Shinault 5/12/17  
SHARON M. SHINAULT

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Rock River Tool & Die, Inc**

Debtor(s)

Case No.

Chapter

**7**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: **40**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date:

**05/19/17**

**James R Wright**  
**James Wright/President**  
Signer/Title

Case 17-81208  
ACCU-CUT Incorporated  
1617 MAGNOLIA STREET  
Rockford, IL 61104

Doc 1

Filed 05/19/17 Entered 05/19/17 13:07:01  
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1335 Lakeside Drive  
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Romeoville, IL 60446

Aramark Uniform Services  
Auca Chicago MC Lock Box  
25259 NETWORK PLACE  
Chicago, IL 60673-1252

Danny L Jones  
1507 8th Avenue  
Rock Falls, IL 61071

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Kirk Kirking  
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Bowling Green, OH 43402

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Dallas, TX 75320-5665

EWT/3DCNC Inc  
3019 Eastrock Court  
PO Box 7473  
Rockford, IL 61109-7473

Pro Tech Calibraion & Repair  
1827 First Ave  
Silvis, IL 61282

BlueWater Thermal Solutions  
PO Box 712534  
Cincinnati, OH 45271-2534

Gleason Cutting Tools  
Dept 550  
PO Box 8000  
Buffalo, NY 14267

Robert W Snyder  
310 9th Ave  
Sterling, IL 61081

Carroll O Berg, Jr  
29028 Mechling Ln  
Rock Falls, IL 61071

Hulick Metals, Inc  
c/o: Attorney Tom Green  
6833 Stalter Drive  
Rockford, IL 61108

S.J. Smith Welding Supply  
2500 1st Ave  
Rte. 40  
Rock Falls, IL 61071-3523

Chad M Oldham  
700 N Meyers Ave  
Milledgeville, IL 61051

James Wright  
2104 E 39th Street  
Sterling, IL 61081

Sauk Valley Bank  
201 West 3rd Street  
Sterling, IL 61081

Cline Tool Service Co, Inc  
Attn: Accounting  
PO Box 866  
Newton, IA 50208

Johnson Oil Co  
1305 12th Avenue  
Rock Falls, IL 61071

Scott E Tornow  
207 S Lincoln Street  
Tampico, IL 61283-7716

Cody A Lawson  
1406 8th Avenue  
Rock Falls, IL 61071

Joseph J Wright  
2207 14th Ave  
Sterling, IL 61081

Sharon Shinault  
209 W 20th Street  
Rock Falls, IL 61071

Terry A Warner  
2201 E. 7th Street  
Sterling, IL 61081

Thomas W Cole  
406 E 5th Street  
Sterling, IL 61081

Todd D Tornow  
106 North Main Street  
Tampico, IL 61283

United Steel Workers of America  
502 Woodburn Avenue  
PO Box 916  
Sterling, IL 61081

United Steel Workers of America  
Attn: Mark Trone  
679 W. 2nd Street  
Galesburg, IL 61401

United Way of STRLG & RF  
502 1st Ave  
Sterling, IL 61081

USA Carbide Tooling Inc  
PO Box 170908  
Spartanburg, SC 29301-0908

Whiteside County Collector  
Whiteside County Courthouse  
200 E. Knox Street  
Morrison, IL 61270

Zapp Tooling Alloys Inc  
c/o Zapp Precision Strip Inc  
266 Barnet Blvd  
New Bedford, MA 02745

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Rock River Tool & Die, Inc**

Debtor(s)

Case No.

Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Rock River Tool & Die, Inc** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☐ None [Check if applicable]

Date

**05/19/17**



**Bernard J. Natale 2018683 Illinois**

Signature of Attorney or Litigant

Counsel for **Rock River Tool & Die, Inc**

**Bernard J. Natale, Ltd**

**Edgebrook Office Center**

**1639 N. Alpine Road, Suite 401**

**Rockford, IL 61107**

**(815) 964-4700 Fax: (815) 316-4646**

**natalelaw@bjnatalelaw.com**